Substitute for form 1449/PTO (Revised 07/2007) INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary) Sheet 1 of 1				Complete if Known						
				Application Number			10/583,393			
				Filing Date			June 19, 2006			
				First Named Inventor Art Unit			Derya Olgen			
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Examiner	Cite			Publication Date MM-DD-YYYY		Name of Patentee or Applicant of Cited Document			Pages, Columns, Lines, Where Relevant Passages of Relevant Figures	
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	1	1 EP 0610313 B1		10/26/1992		Goeke	n, et al.		English Language Abstract Attached	
	2	2 CN 1072300 A		05/19/1993		Goeke	en, et al.		*Counter- part of EP 0610313 at Ref. 1	
Ever-				<u> </u>		Data				
Examiner Signature						Date Consid	dered			

^{*}Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.